## **Disease Modifying Drugs for Multiple Sclerosis**

Glatiramer Acetate (Copaxone® — Teva Neuroscience)
Interferon beta-1a (Avonex® — Biogen Idec)
Interferon beta-1a (Rebif® — EMD Serono)
Interferon beta-1b (Betaseron® — Bayer Laboratories)
Mitoxantrone (Novantrone® — EMD Serono, generic)
Natalizumab (Tysabri® — Biogen Idec)
AHFS 92:00, Unclassified Therapeutic Agents

The following table provides a brief comparison of the available disease modifying agents used to manage multiple sclerosis.

Table. Comparis	Table. Comparison of Disease Modifying Agents Used for Multiple Sclerosis <sup>1-8</sup>								
Property	Glatiramer (Copaxone)	Interferon beta-1a (Avonex)	Interferon beta-1a (Rebif)	Interferon beta-1b (Betaseron)	Mitoxantrone (Novantrone)	Natalizumab (Tysabri)			
<b>Indications for Use</b>									
Labeled Indications	Reduce frequency of exacerbations in relapsing remitting multiple sclerosis		Reduce frequency of exacerbations and slow physical disability in relapsing remitting multiple sclerosis	Reduce frequency of exacerbations in relapsing forms of multiple sclerosis: • relapsing remitting multiple sclerosis (RRMS) • secondary progressive multiple sclerosis (SPMS)  Clinical isolated syndrome	<ul><li>multiple sclerosis (SPMS)</li><li>progressive relapsing multiple sclerosis (PRMS)</li></ul>	Monotherapy: Reduce frequency of exacerbations and slow physical disability in relapsing forms of multiple sclerosis (for patients who had inadequate response or cannot take other therapy)  Induce and maintain response and remission in moderate to severe Crohn disease (for patients who had inadequate response or cannot take other therapy)			
Unlabeled Indications	None	Secondary progressive multiple sclerosis	Secondary progressive multiple sclerosis Clinical isolated syndrome	None	Acute lymphocytic leukemia Breast cancer Liver carcinoma Non-Hodgkin lymphoma Solid tumors (pediatric)	Combination use with glatiramer acetate or interferon beta for RRMS			

Dana anter	Table. Comparison of Disease Modifying Agents Used for Multiple Sclerosis <sup>1-8</sup> Property Glatiramer Interferon beta-1a Interferon beta-1a Interferon beta-1b Mitoxantrone Natalizumab							
Property	(Copaxone)	Interferon beta-1a (Avonex)	Interferon beta-1a (Rebif)	Interferon beta-1b (Betaseron)	Mitoxantrone (Novantrone)	Natalizumab (Tysabri)		
<b>Dosing and Adminis</b>		(Avonex)	(Kebii)	(Detaseron)	(Novantrone)	(Tysabri)		
Route of	Subcutaneous	Intramuscular	Subcutaneous	Subcutaneous	Intravenous	Intravenous		
Administration	Subcutaneous	miramuscular	Subcutaneous	Subcutaneous	Intravenous	Intravenous		
Dosing Frequency	Daily	Weekly	Three times weekly	Every other day	Every 3 months	Monthly		
	Patient self-	Patient self-	Patient self-	Patient self-	Infuse over 5 to 15 minutes in	Infuse over 1 hour in		
Administration Method			administration					
Method	administration	administration or	administration	administration	clinic or hospital setting	clinic or hospital setting		
		give at physician's			capable of preparing and			
Dose for RRMS	20	office	22 mcg to 44 mcg	250 mcg	administering chemotherapy	200 : : : : : : : : :		
	20 mg	30 mcg	subcutaneous 3	<u> </u>	12 mg/m <sup>2</sup> intravenous every 3 months	300 mg intravenous every		
(adults)	subcutaneous	intramuscular		subcutaneous every	months	4 weeks		
	daily	weekly	times weekly after	other day after				
			gradual dose titration	gradual dose				
A wailahilitar Ctamana	and C4abili4		utration	titration				
Availability, Storage Generic available	No	No	No	No	Yes	No		
	Solution in		Solution in		Multi-dose vials:	I .		
Product Description		Lyophilized		Lyophilized		Single use vial:		
and Package Size	prefilled, single-	powder for	prefilled, single-	powder for	20 mg/10 mL	300 mg/15 mL		
	use syringes:	reconstitution:	use syringes:	reconstitution:	25 mg/12.5 mL			
	20 mg/1 mL	30 mcg/1 mL	22 mcg	300 mcg/1.2 mL	30 mg/15 mL			
		Solution in	44 mcg					
			Tituation model					
		prefilled syringes:	Titration pack:					
		30 mcg	six 8.8 mcg					
			prefilled syringes					
			and six 22 mcg					
Ctanasa	Defricensts	Danidani	prefilled syringes	Doom town and	Do any tanananatana	Defricents		
Storage	Refrigerate. Excursions of	Powder:	Refrigerate	Room temperature	Room temperature	Refrigerate		
		Refrigerate; can store		D. a.t. Comme	De mat Conse	De mat Conservation		
	room temperature	at room temperature	temperature for 30	Do not freeze.	Do not freeze.	Do not freeze or shake.		
	permitted.	for 30 days.	days.			Dustant from light		
	Do not freeze.	Carringood	Do not freeze.			Protect from light		
	Do not freeze.	Syringes: Refrigerate; can store						
	Protect from		Protect from light.					
		at room temperature	Frotect from fight.					
	light.	for 7 days.						
		Do not freeze.						
		Protect from light.						
		Frotect Holli light.						

Property	Glatiramer	odifying Agents U	Interferon beta-1a	Interferon beta-1b	Mitoxantrone	Natalizumab
- <b>*</b>	(Copaxone)	(Avonex)	(Rebif)	(Betaseron)	(Novantrone)	(Tysabri)
Stability	Do not use beyond expiration date printed on cartons.	Use reconstituted product within 6 hours and store in refrigerator.	Do not use beyond expiration date printed on cartons.	Use reconstituted product within 3 hours and store in refrigerator.	Use reconstituted product immediately. Discard any remaining solution in vial.  Store opened, undiluted solution for 7 days at room temperature or 14 days in the refrigerator.	Use reconstituted product within 8 hours and store in the refrigerator.
<b>Special Populations</b>	T	1	T	T		
Hepatic Dysfunction	No dosage adjustment.	No dosage adjustment. Severe hepatic injury can occur. Use caution when used in combination with other hepatotoxic drugs.	Initiate with caution in patients with active or significant liver disease or liver enzyme elevations ≥ 2.5 times normal.	No dosage adjustment. Severe hepatic injury can occur. Use caution when used in combination with other hepatotoxic drugs. Initiate with caution in patients with active or significant liver disease or liver enzyme elevations ≥ 2.5 times normal.	Avoid use in multiple sclerosis patients with hepatic impairment. For other diseases, initiate with caution and consider lower doses.	No dosage adjustment. Severe hepatic injury can occur. Stop therapy in patients with jaundice or elevated serum hepatic enzymes or bilirubin.
Renal Dysfunction	No dosage adjustment	No dosage adjustment	No dosage adjustment	No dosage adjustment	No dosage adjustment	No dosage adjustment
Pediatric patients	Not labeled for use in patients <18 years of age. Use for juvenile onset multiple sclerosis is based on descriptive studies.	Not labeled for use in patients <18 years of age. Use for juvenile onset multiple sclerosis is based on descriptive studies.	Not labeled for use in patients <18 years of age. Use for juvenile onset multiple sclerosis is based on descriptive studies.	Not labeled for use in patients <18 years of age. Use for juvenile onset multiple sclerosis is based on descriptive studies.	Not labeled for use in patients <18 years of age. Use to treat solid tumors is based on descriptive studies.	Not labeled for use in patients <18 years of age.

Table. Compa	Table. Comparison of Disease Modifying Agents Used for Multiple Sclerosis <sup>1-8</sup>							
Property	Glatiramer	Interferon beta-1a	Interferon beta-1a	Interferon beta-1b	Mitoxantrone	Natalizumab		
	(Copaxone)	(Avonex)	(Rebif)	(Betaseron)	(Novantrone)	(Tysabri)		
Black Box Warnings	None	None	None	None	Vesicant: severe tissue damage may occur if product extravasated. Never give by intrathecal, subcutaneous, intramuscular, or intra-arterial administration.  Bone marrow suppression: do not give if neutrophil count < 1,500 cells/mm³, except in patients with acute nonlymphocytic leukemia.  Cardiotoxicity: risk increases with cumulative lifetime dose (maximum dose is 140 mg/m² for multiple sclerosis).  Manufacturer recommends evaluating left ventricular ejection fraction (LVEF) before each dose. Do not give to multiple sclerosis patients with LVEF < 50% or significant reduction in LVEF with previous dose.  Increased risk of secondary acute myelogenous leukemia.	Increased risk of progressive multifocal leukoencephalopathy (PML).  Monitor patient and stop therapy immediately if any sign/symptom suggests PML.  Only prescribe to patients enrolled in the TOUCH program.		
Comments	None	Contains human albumin	Contains human albumin	Contains human albumin	Chemotherapeutic agent	Only available through restricted distribution program- TOUCH		

## **References:**

- 1. Avonex (Interferon beta-1a) IM injection [package insert]. Cambridge, MA: Biogen Idec, Inc; 2006, November.
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- 3. Copaxone (glatiramer acetate) injection [package insert]. Kansas City, MO: TEVA Neuroscience, Inc.; 2007, November.
- 4. Betaseron (Interferon Beta-1b) for SC injection [package insert]. Montville, NJ: Bayer Healthcare Pharmaceuticals; 2007, October.
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